

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>W</i>	78331	
O.I.P.E. CLASSIFIER	<i>RSD</i>		3/25/00
FORMALITY REVIEW	<i>W</i>	60125	5/15/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1	6/1/02
2	6/1/02
3	6/1/02
4	6/1/02
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Claim	Date
Final	
Original	
51	6/1/02
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100	6/1/02

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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1c530 U.S. PTO

09/525206



Form (Rev)

APPLICANTS

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